|  |  |            |                                |       |               |                                     |                  |                 | Application/or Docket Number |                        |        |                     |                        |  |  |
|--|--|------------|--------------------------------|-------|---------------|-------------------------------------|------------------|-----------------|------------------------------|------------------------|--------|---------------------|------------------------|--|--|
| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 1997 REST AVAILABLE 294  |  |            |                                |       |               |                                     |                  |                 |                              |                        |        |                     |                        |  |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |            |                                |       |               |                                     |                  |                 | LL<br>PE                     | ENTITY                 | OR     |                     | R THAN<br>ENTITY       |  |  |
| FOR  |  |            | NUMBER FILED                   |       |               | NUMBER                              | RATI             |                 | FEÉ                          |                        | RATE   | FEE                 |                        |  |  |
| BASI   | C FEE  |            |                                |       |               |                                     |                  |                 | 395.00                       | OR                     |        | 790.00              |                        |  |  |
| TOTA   | AL CLAIMS                                      |            | minus 20 =                     |       |               | *                                   | x\$11            | =               |                              | OR                     | x\$22= |                     |                        |  |  |
| INDE   | PENDENT CLA                                    | AIMS       | minus 3 =                      |       |               | *                                   | x41:             | =               |                              | OR                     | x82=   | -                   |                        |  |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |            |                                |       |               | +135                                | _                |                 | OR                           | +270=                  |        |                     |                        |  |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |            |                                |       |               |                                     | TOTA             |                 | ٠,                           | OR                     | TOTAL  |                     |                        |  |  |
| CLAIMS AS AMENDED - PART II  |  |            |                                |       |               |                                     |                  | L               |                              | Un                     |        | TUAN                |                        |  |  |
| <u></u>  |  | (Colu      | ımn 1)                         |       | (Co           | olumn 2)                            | (Column 3)       | SM/             | ALL                          | ENTITY                 | OR     |                     | R THAN<br>ENTITY       |  |  |
| AMENDMENT A  |  | REM/<br>AF | AIMS<br>AINING<br>TER<br>DMENT |       | NU<br>PRE     | GHEST<br>UMBER<br>VIOUSLY<br>ID FOR | PRESENT<br>EXTRA | RATE            |                              | ADDI-<br>TIONAL<br>FEE | *      | RATE                | ADDI-<br>TIONAL<br>FEE |  |  |
| NDN  | Total  | * /        |                                | Minus | **            | R)                                  | =                | x\$11           | =                            |                        | ÓR     | x\$22=              |                        |  |  |
| MEI  | Independent                                    | 6          | <b>)</b>                       | Minus | ***           | 6                                   | = *              | x41=            |                              |                        | -OR    | x82=                |                        |  |  |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |            |                                |       |               |                                     |                  |                 | =.                           | ,*                     | OR     | +270=               | ÷                      |  |  |
|  |  |            |                                |       |               |                                     |                  | TOT<br>ADDIT. F |                              |                        | OR     | TOTAL<br>ADDIT. FEE |                        |  |  |
|  |  |            | ımn 1)<br>AIMS                 |       | <del>,`</del> | olumn 2)<br>GHEST                   | (Column 3)       |                 |                              |                        |        |                     | <u> </u>               |  |  |
| ENT B  |  | REM/<br>AF | AINING<br>TER<br>DMENT         |       | PRE           | JMBER<br>VIOUSLY<br>ID FOR          | PRESENT<br>EXTRA | RATE            | Ē                            | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |  |  |
| NO.  | Total  | *          |                                | Minus | **            |                                     | =                | x\$11           | =                            |                        | OR     | x\$22=              |                        |  |  |
| AMENDME  | Independent                                    | *          |                                | Minus | ***           |                                     | =                | x41=            | =                            |                        | OR     | x82=                |                        |  |  |
| ٧  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |            |                                |       |               |                                     |                  |                 | =                            |                        | OR     | +270=               |                        |  |  |
|  | (Column 1) (Column 2) (Column 3)               |            |                                |       |               |                                     |                  |                 | AL<br>EE                     |                        | OR     | TOTAL<br>ADDIT. FEE |                        |  |  |
| AMENDMENT C  | - 1.71<br>- 1.71                               | REM/<br>AF | AIMS<br>AINING<br>TER<br>DMENT |       | NL<br>PRE     | GHEST<br>JMBER<br>VIOUSLY<br>ID FOR | PRESENT<br>EXTRA | RATI            | Ξ.                           | ADDI-<br>TIONAL<br>FEE | *      | RATE                | ADDI-<br>TIONAL<br>FEE |  |  |
|  | Total  | *          |                                | Minùs | **            |                                     | =                | x\$11           | =                            |                        | OR     | x\$22=              |                        |  |  |
|  | Independent                                    | *          |                                | Minus | ***           |                                     | =                | x41:            | =                            | *                      | OR     | x82=                |                        |  |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |            |                                |       |               |                                     |                  | +135            | =                            |                        | OR     | +270=               | ,                      |  |  |
| <ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."</li> <li>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found</li> </ul> |  |            |                                |       |               |                                     |                  | TOT<br>ADDIT. F | EE                           | oriate hov in          |        | TOTAL<br>ADDIT. FEE |                        |  |  |

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1994

Application or Docket Number

402394

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |  |  |                   |                                       |                          |      | MALI | ENTITY                 | OB                  | OTHEI<br>SMALL | R THAN<br>ENTITY       |
|---|--|--|--|-------------------|---------------------------------------|--------------------------|------|------|------------------------|---------------------|----------------|------------------------|
| FOF   | }  |  | NUMBER FILED   |                   | NUMBER EXTRA                          |                          |      | AIE  | FEE                    | AB                  | RATE           | FEE                    |
|   |  |  |  |                   | L                                     | -                        |      |      |                        |                     | 1 6            |                        |
| BAS   | IC FEE   |  | A STATE OF THE STA |                   |                                       |                          |      |      | 365.00                 | OR                  | 1.4¥/^         | 730.00                 |
| тот   | AL CLAIMS  | 7  | minus 20 =   |                   |                                       | *                        |      |      |                        | OR                  | x\$22=         |                        |
| INDE  | PENDENT CL   | AIMS   | mini mini  | ıs 3 =            | * 3                                   |                          |      | 38=  |                        | OR                  | x76=           | 228                    |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |  |  |                   |                                       |                          |      |      |                        | OR                  | +240=          |                        |
| * If t  | he difference in co  | T  | OTAL   |                   | OR                                    | TOTAL                    | 958  |      |                        |                     |                |                        |
|   | OLAIMO AO AMENDED DA DE II                                   |  |  |                   |                                       |                          |      |      |                        | ΙΟ'n                | 1              |                        |
|   | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |  |  |                   |                                       |                          |      |      | SMALL ENTITY           |                     |                | R THAN<br>ENTITY       |
| AMENDMENT &   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT    |  | NI<br>PRE         | GHEST<br>UMBER<br>EVIOUSLY<br>AID FOR | PRESENT<br>EXTRA         | R    | ATE  | ADDI-<br>TIONAL<br>FEE |                     | RATE           | ADDI-<br>TIONAL<br>FEE |
|   | Total  | · 8  | Minus  | **                | 70                                    | =                        | x\$  | 11=  |                        | OR                  | x\$22=         |                        |
|   | Independent  | * 4  | Minus  | ***               | 6                                     | = 🛇                      | x3   | 38=  |                        | OR                  | x76=           | -                      |
| <u>و</u>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |  |  |                   |                                       |                          |      |      |                        | OR                  | +240=          |                        |
|   |  |  |  |                   |                                       |                          |      |      | TOTAL<br>ADDIT. FEE    |                     |                |                        |
| AMENDMENT WH  |  | (Column 1)  CLAIMS REMAINING AFTER AMENDMENT |  | HI<br>NI<br>PRE   | Olumn 2) GHEST UMBER EVIOUSLY AID FOR | (Column 3) PRESENT EXTRA | R    | ATE  | ADDI-<br>TIONAL<br>FEE |                     | ADDIT. FEE     | ADDI-<br>TIONAL<br>FEE |
|   | Total  |  | Minus  | **                | Te)                                   | = 🛇                      | x\$  | 11=  | - 1                    | OR                  | x\$22=         |                        |
|   | Independent  | • 4  | Minus  | ***               | 6                                     | = 🛇                      | x3   | 38=  |                        | OR                  | x76=           | 6                      |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |  |  |                   |                                       |                          |      |      |                        | OR                  | +240=          |                        |
|   | (Column 1) (Column 2) (Column 3)                             |  |  |                   |                                       |                          |      |      |                        | OR TOTAL ADDIT. FEE |                |                        |
| ENT OC  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT    |  | , HI<br>NI<br>PRE | GHEST<br>JMBER<br>VIOUSLY<br>LID FOR  | PRESENT<br>EXTRA         | R    | ATE  | ADDI-<br>TIONAL<br>FEE |                     | RATE           | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total  | 176  | Minus  | **                | 70                                    | = 2                      | x\$  | 11=  |                        | OR                  | x\$22=         |                        |
|   | Independent  | • 3  | Minus  | ***               | 6                                     | = 🚫                      | , x3 | 38=  |                        | OR                  | x76=           |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +120=         |  |  |                   |                                       |                          |      |      |                        |                     | +240=          |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  *** If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |  |  |                   |                                       |                          |      |      |                        |                     |                |                        |